

**INDIVIDUAL  
MEDICARE SUPPLEMENT COVERAGE**

Sold in New Jersey

By

**PENNSYLVANIA LIFE INSURANCE COMPANY**

Telephone: 1-888-802-9497

PLAN INFORMATION				MEDICARE PART A HOSPITAL COSTS				MEDICARE PART A SKILLED NURS. FACILITY (SNF) COSTS				MEDICARE PART B MEDICAL COSTS (DRS., OUTPATIENT, ETC.)				OTHER			
				PLAN PAYS				PLAN PAYS				PLAN PAYS				PLAN PAYS			
PLAN	* MONTHLY PREMIUM AT AGE 65 <i>(INCREASES WITH AGE)</i>	COMPANY MAY DENY COVERAGE FOR MEDICAL REASONS	*** PRE-EX. MEDICAL CONDITION WAITING PERIOD	\$912 DEDUCT. (2005)	\$228 COPAY FOR DAYS 61-90 (2005)	\$456 COPAY FOR DAYS 91-150 (2005)	100% AFTER DAY 150 FOR ADDITIONAL 365 DAYS IN A LIFETIME	\$114.00 COPAY FOR DAYS 21-100 (2005)	AFTER 100 DAYS WHEN MEDICARE STOPS PAYING	COSTS IN A SNF NOT APPROVED BY MEDICARE	\$110 ANNUAL DEDUCT. (2005)	20% OF MEDICARE ALLOWED AMOUNT	COSTS THAT EXCEED ALLOWED AMOUNT	PARTS A & B BLOOD DEDUCTIBLE	FOREIGN TRAVEL EMERGENCY	AT-HOME RECOVERY	Rx DRUGS	PREVENTIVE MEDICAL CARE	
A	FNS 80.98 FS 93.46 MNS 89.49 MS 103.19	Yes**	3 mos.		Yes	Yes	Yes							Yes		Yes			
B	FNS 105.08 FS 121.24 MNS 116.05 MS 133.91	Yes**	3 mos.	Yes	Yes	Yes	Yes							Yes		Yes			
C	FNS 130.13 FS 150.25 MNS 143.73 MS 165.85	Yes**	3 mos.	Yes	Yes	Yes	Yes							Yes	Yes	Yes	Yes		
D	FNS 115.01 FS 132.68 MNS 126.91 MS 146.47	Yes**	3 mos.	Yes	Yes	Yes	Yes							Yes		Yes	Yes	Yes	
F	FNS 127.76 FS 147.72 MNS 141.09 MS 162.82	Yes**	3 mos.	Yes	Yes	Yes	Yes							Yes	Yes	Yes	Yes		

\* FNS = FEMALE NON-SMOKER      FS = FEMALE SMOKER      MNS = MALE NON-SMOKER      MS = MALE SMOKER  
NON-SMOKER RATES APPLY TO APPLICATIONS SUBMITTED DURING THE 6-MONTH OPEN ENROLLMENT PERIOD.

NOTE: ABOVE PREMIUMS DO NOT INCLUDE A ONE-TIME \$25 POLICY FEE.

\*\* SOME APPLICANTS MAY NOT BE ABLE TO PURCHASE THIS PLAN AFTER THE OPEN ENROLLMENT PERIOD. (See Guide to Health Insurance for People with Medicare.)

\*\*\* PRE-EXISTING MEDICAL CONDITION WAITING PERIOD MAY NOT APPLY (See Guide to Health Insurance for People with Medicare).

(This information may also be found on our web site at [www.state.nj.us/health/senior\(ship.shtml\)](http://www.state.nj.us/health/senior(ship.shtml)))

STATE OF NEW JERSEY  
STATE HEALTH INSURANCE  
ASSISTANCE PROGRAM  
S.H.I.P.  
DEPT. OF HEALTH & SR.  
SERVICES  
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